

Salt River

Pima-Maricopa Indian Community 10,005 East Osborn Road, Scottsdale, Arizona 85256 Telephone (480) 362-7400 FAX (480) 362-7593

BOARD/COMMITTEE APPLICATION

Fill out the application in it's entirety. Resumes may be attached, but please DO NOT use "See Resume". Name: Date Are you Native American? ☐ Yes ☐ No If Yes, Tribal Affiliation and ID #: _____ Mailing Address: Home Phone #: Work Phone #: _____ Cellular Phone #: E-Mail: Which form of contact do you prefer? ☐ Mail ☐ Home Phone ☐ Cell Phone ☐ Work Phone ☐ E-mail EMPLOYMENT Are you employed? ☐ Yes ☐ No If Yes, Employer: _____ Supervisor(s): Holding a Board/Committee seat requires dedicated individuals. Do you have any commitments which would prevent you from attending daytime, evening, weekend, and emergency meetings? ☐ Yes ☐ No Have you ever been terminated? ☐ Yes ☐ No Reason: _____ Have you ever been asked to resign? ☐ Yes ☐ No Reason: BOARD INFORMATION What Board/Committee are you applying for? _____ What position are you interested in? ☐ Community Member ☐ Professional ☐ Other Current Boards/Committees you serve on: Board/Committee Dates Served Seat Held Previous Boards/Committees you have served on: Board/Committee Dates Served Seat Held Please list any relatives currently on the Board/Committee: Please list any relatives who are employed by the Enterprise which the Board/Committee will oversee: Why are you interested in being a Board/Committee member? What other experience do you have that relates to the industry/issues the Board/Committee deals with?

EDUCATION								
School Level	Name & L	ocation Of School	Graduated	Certifica Diplom		Major/ Degree	Graduation Year	
High School/G.E.D.			Yes □ No □				7.507	
Trade/Business School			Yes 🗆 No 🗅					
College			Yes 🗆 No 🗅					
Graduate School			Yes □ No □					
PHILIPPINE.		CR	RIMINAL HISTOR	Υ	1 1100			
If selected for a Bo Have you ever plea If Yes, identify the crim Please provide any detabut will be considered falsifying your application.	ad guilty to o ad guilty to o ad guilty to o ad guilty to o e for which you ails you feel are as part of an o	r plead no contest to plead no contest to plead no contest to plead no contest to were convicted, the determinant of the conviction of the properties of the conviction of the conviction of the properties of the plead no contest to plead no contes	to crimes against to a misdemeanor to a felony? to any type of thefates of the conviction of a crime will not auto	persons? ? t or fraud? and the locatio	n of the o	Yes Yes Yes Yes Court in which you	No N	
Crime		Dates	Court Loc	urt Location		Details		
			COMMENTS					
			REFERENCES		S. M.			
Please provide con	tact informat	ion for three refere	nces (who are not		ou)			
Full Name		Daytime Phone Nur	mber Rel	ation to You		Years I	Known	
THE STATE OF	10/200		TION AND AGRE	NAME OF TAXABLE PARTY OF TAXABLE PARTY.	To Table		IS THE	
 Any misreprese refusal of my ap It is my underst verify the inform I understand an I agree to confo 	oplication. tanding that nation given. d agree that	the Board/Committ I release from lial I <u>MAY</u> be required	tee will review my bility any person g to submit to a bad	application iving or rece	and ma iving ar	y contact my ny such inform	references to ation.	
Applicant Signature	:			Date:				

Board Application (Revised 12/05)
Page 2 of 2